## DECLARATION AND POWER ATTORNEY FOR PATENT APPLICATION

ATT DOCKET NO. 10002193-1

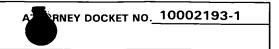
As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the enecification of wh	ich is att	tached hereto unless the	following hav is at	necked:
•			-	
( ) was filed on Number	and w	as US Applica vas amended on	tion Serial No. or P	CT International Application applicable).
including the claims, a	is amend	iewed and understood ded by any amendment s material to patentabilit	(s) referred to above	e above-identified specification, ve. I acknowledge the duty to CFR 1.56.
inventor(s) certificate listed b	ty benefits below and	under Title 35, United State	foreign application for	any foreign application(s) for patent or patent or patent or inventor(s) certificate having a
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
		-		YES: NO:
				YES: NO:
Provisional Application	<u></u>			
	ınder Title	35, United States Code Sect	ion 119(e) of any Unite	d States provisional application(s) listed
below:	4.00	PLICATION SERIAL NUMBER	FILING DATE	
	APP	PICATION SERIAL NOWIBER	TIENG DATE	
U. S. Priority Claim	L			
application and the national or PCT international filing		h of Title 35, United States (	Code Section 112, I ack	knowledge the duty to disclose materia
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APPLICATION SERIAL NUMBER  POWER OF ATTORNEY: As a named inventor, I hereby declare that a made on information a the knowledge that will or both, under Section may jeopardize the validations.  APPLICATION SERIAL NUMBER  Customer  Customer  Customer  Send Correspondence to HEWLETT-PACKARD CO Intellectual Property Adn P.O. Box 272400  Fort Collins, Colorado 80  I hereby declare that a made on information a the knowledge that will or both, under Section may jeopardize the validations.  Full Name of Inventor: Lar	reby appoir rademark ( Number  SMPANY ninistration 0527-2400 all stater nd belies illful falso idity of tery A. Co	h of Title 35, United States (le of Federal Regulations, Sectoriational filing date of this application of the following attorney(s) office connected therewith:  O22879  The ments made herein of ments made herein of ments and the lift of the United he application or any page 1.00 for file 18 of the United he application or any page 2.00 for file 18 of the United he application or any page 2.00 for file 18 of the United he application or any page 2.00 for file 18 of the United he application or any page 2.00 for file 18 of the United he application or any page 2.00 for file 18 of the United he application or any page 2.00 for file 18 of the United he application or any page 2.00 for file 18 of the United he application or any page 2.00 for file 18 of the United he application or any page 2.00 for file 18 of the United he application or any page 2.00 for file 18 of the United he application or any page 3.00 for file 18 of the United	and/or agent(s) to prosect the control of the contr	recovered between the filing date of the prior (patented/pending/abandoned)  secute this application and transact all statements are true and that all statements essentially statements were made with his hable by fine or imprisonment that such willful false statements.
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## DECLARATION AND POWER ATTORNEY FOR PATENT APPLICATION Continued)



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	Residence:	1708 N. 20th St., Boise, ID	83702			
	Post Office Address:	Same as residence			<u>, , , , , , , , , , , , , , , , , , , </u>	
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	Inventor's Signature		Date			
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	Full Name of # 3 joint inventor:			Citizenship:_		
	Residence:					<del></del>
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m	Inventor's Signature		Date			
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, 12-11 12-11 13-11	Full Name of # 4 joint inventor:			_ Citizenship:_	• •	
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	Full Name of # 5 joint inventor:	:		_ Citizenship:_		· · · · · · · · · · · · · · · · · · ·
	Residence:		, <del>.</del>			
	Post Office Address:					
	Inventor's Signature		Date			
	Full Name of # 6 joint inventor	:		Citizenship:		
	Residence:					
	Post Office Address:					
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	Inventor's Signature		Date			
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	Full Name of # 7 joint inventor	:		_ Citizenship:_		
	Residence:	-114-				
	Post Office Address:					
	Inventor's Signature		Date		· <del>-</del>	
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	Full Name of # 8 joint inventor			Citizenship:	. —————————————————————————————————————	
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